

## ISSUE SLIP STAPLE AREA (for additional cross references)

09/964532

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H.T.	1117	10-18-01
RESPONSE FORMALITY REVIEW			10/23/01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1 ✓	1/2
2 ✓	1/2
3 ✓	1/2
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

NL 10/23/01